



## REPORT OF ELECTIONEERING COMMUNICATION

For use by a person who has expended \$100 or more per year on electioneering communications.

Any person incurring costs of \$1,000 or more must file within 48 hours of incurring costs.

Name of person/entity \_\_\_\_\_

Address (Physical) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Type of Report:

☐ 7-day Pre-Primary

☐ 30-day Post-Primary

☐ 48-hour Report

☐ 7-day Pre-General

☐ 30-day Post General

Is this an amended report? ☐ No ☐ Yes

This amends a previous report filed on \_\_\_\_\_

Date of Public Distribution(s) \_\_\_\_\_

Total Expenditures this Statement	\$
Total Itemized Contributions of \$50 or More this statement	\$
Total Contributions this statement	\$

I hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Print Name of Person Completing Form \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Submit Report to:**

**Ben Ysursa  
Secretary of State  
PO Box 83720  
Boise, ID 83720-0080  
208-334-2852  
fax: 208-334-2282**

<b>Itemized Contribution for Electioneering Communications (\$50 or more)</b>
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Name of person/entity\_\_\_\_\_

**PLEASE PRINT/TYPE**

1. Date Received ___/___/___ 2. Contribution Amount \$ _____ 3. <input type="checkbox"/> Cash <input type="checkbox"/> Loan <input type="checkbox"/> In-Kind	4. Name (last, first)_____ 5. Address_____ 6. City/State/Zip_____
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1. Date Received ___/___/___ 2. Contribution Amount \$ _____ 3. <input type="checkbox"/> Cash <input type="checkbox"/> Loan <input type="checkbox"/> In-Kind	4. Name (last, first)_____ 5. Address_____ 6. City/State/Zip_____
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1. Date Received ___/___/___ 2. Contribution Amount \$ _____ 3. <input type="checkbox"/> Cash <input type="checkbox"/> Loan <input type="checkbox"/> In-Kind	4. Name (last, first)_____ 5. Address_____ 6. City/State/Zip_____
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### Itemized Expenditures for Electioneering Communications

Name of person/entity\_\_\_\_\_

1. Date Expended ____/____/____	3. Name (last, first)_____
	4. Address_____
	5. City/State/Zip_____
2. Amount	6. Method of Communication(s)_____
	7. Name of Candidate(s) referred to_____
\$_____	
cash <input type="checkbox"/>	8. Support _____ Oppose_____
in-kind <input type="checkbox"/>	9. Purpose of Expenditure_____

1. Date Expended ____/____/____	3. Name (last, first)_____
	4. Address_____
	5. City/State/Zip_____
2. Amount	6. Method of Communication(s)_____
	7. Name of Candidate(s) referred to_____
\$_____	
cash <input type="checkbox"/>	8. Support _____ Oppose_____
in-kind <input type="checkbox"/>	9. Purpose of Expenditure_____

1. Date Expended ____/____/____	3. Name (last, first)_____
	4. Address_____
	5. City/State/Zip_____
2. Amount	6. Method of Communication(s)_____
	7. Name of Candidate(s) referred to_____
\$_____	
cash <input type="checkbox"/>	8. Support _____ Oppose_____
in-kind <input type="checkbox"/>	9. Purpose of Expenditure_____

1. Date Expended ____/____/____	3. Name (last, first)_____
	4. Address_____
	5. City/State/Zip_____
2. Amount	6. Method of Communication(s)_____
	7. Name of Candidate(s) referred to_____
\$_____	
cash <input type="checkbox"/>	8. Support _____ Oppose_____
in-kind <input type="checkbox"/>	9. Purpose of Expenditure_____